Community-Based Behavioral Services (CBS) Frequently Asked Questions (FAQ)

Updated: September 16, 2021

This FAQ document is intended to provide guidance and clarification to Community Mental Health Centers (CMHCs), Behavioral Health Clinics (BHCs), and Independent Practitioners (IPs) delivering community-based behavioral health services as outlined in the <u>CBS Provider Handbook</u>. Updates to the FAQ will be posted to the HFS website.

Additional questions may be submitted to HFS at HFS.BBH@illinois.gov.

Team-Based Services

- 1. When a staff member who is part of an Assertive Community Treatment (ACT) team or Community Support Team (CST) leaves a provider agency, does the provider have to replace that staff member on the team within 30 days? (9/16/21)
 - A. No, there is no requirement that providers delivering ACT or CST replace team members who leave the provider agency within a certain timeframe. Providers should make efforts to replace team members who leave the agency as soon as possible to meet the minimum staffing requirements for CST and ACT teams as outlined in 89 III. Admin. Code 140.Table N. Providers unable to fill minimum team staffing requirements within 180 days should reach out to the Department for additional technical assistance and guidance by emailing HFS.BBH@illinois.gov.
- 2. 89 Ill. Admin. Code 140.Table N(e)(1)(C)(ii) states: "Psychiatric Resource. ACT services are directly supported by a treating psychiatrist and/or Advance Practice Nurse at a ratio of 10 hours per week for each 60 participating individuals. An ACT team must have access to at least 5 hours of dedicated treatment and consultation time from the participating psychiatrist on a weekly basis." Can you please clarify this requirement? Can an Advance Practice Nurse provide the 5 hours of dedicated treatment and consultation time? (9/16/21)
 - A. Yes, the 5 hours of dedicated treatment and consultation time may be provided by either a psychiatrist or an Advance Practice Nurse.